

UNITED STATES DEPARTMENT OF COMMERCE United States Patent and Trademark Office Address: COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, Virginia 22313-1450

NOTICE OF ALLOWANCE AND FEE(S) DUE

30678

7590

08/18/2006

CONNOLLY BOVE LODGE & HUTZ LLP SUITE 800 1990 M STREET NW WASHINGTON, DC 20036-3425 EXAMINER

BARRY, CHESTER T

ART UNIT PAPER NUMBER

1724 DATE MAILED: 08/18/2006

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/528,797	03/23/2005	Chrystelle Langlais	21029-00288-US1	9162

TITLE OF INVENTION: MEMBRANE BIOREACTOR WASTE WATER TREATMENT METHOD

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	11/20/2006

THE APPLICATION IDENTIFIED ABOVE HAS BEEN EXAMINED AND IS ALLOWED FOR ISSUANCE AS A PATENT. PROSECUTION ON THE MERITS IS CLOSED. THIS NOTICE OF ALLOWANCE IS NOT A GRANT OF PATENT RIGHTS. THIS APPLICATION IS SUBJECT TO WITHDRAWAL FROM ISSUE AT THE INITIATIVE OF THE OFFICE OR UPON PETITION BY THE APPLICANT. SEE 37 CFR 1.313 AND MPEP 1308.

THE ISSUE FEE AND PUBLICATION FEE (IF REQUIRED) MUST BE PAID WITHIN <u>THREE MONTHS</u> FROM THE MAILING DATE OF THIS NOTICE OR THIS APPLICATION SHALL BE REGARDED AS ABANDONED. <u>THIS STATUTORY PERIOD CANNOT BE EXTENDED</u>. SEE 35 U.S.C. 151. THE ISSUE FEE DUE INDICATED ABOVE DOES NOT REFLECT A CREDIT FOR ANY PREVIOUSLY PAID ISSUE FEE IN THIS APPLICATION. IF AN ISSUE FEE HAS PREVIOUSLY BEEN PAID IN THIS APPLICATION (AS SHOWN ABOVE), THE RETURN OF PART B OF THIS FORM WILL BE CONSIDERED A REQUEST TO REAPPLY THE PREVIOUSLY PAID ISSUE FEE TOWARD THE ISSUE FEE NOW DUE.

HOW TO REPLY TO THIS NOTICE:

I. Review the SMALL ENTITY status shown above.

If the SMALL ENTITY is shown as YES, verify your current SMALL ENTITY status:

A. If the status is the same, pay the TOTAL FEE(S) DUE shown above.

B. If the status above is to be removed, check box 5b on Part B - Fee(s) Transmittal and pay the PUBLICATION FEE (if required) and twice the amount of the ISSUE FEE shown above, or

If the SMALL ENTITY is shown as NO:

A. Pay TOTAL FEE(S) DUE shown above, or

B. If applicant claimed SMALL ENTITY status before, or is now claiming SMALL ENTITY status, check box 5a on Part B - Fee(s) Transmittal and pay the PUBLICATION FEE (if required) and 1/2 the ISSUE FEE shown above.

II. PART B - FEE(S) TRANSMITTAL, or its equivalent, must be completed and returned to the United States Patent and Trademark Office (USPTO) with your ISSUE FEE and PUBLICATION FEE (if required). If you are charging the fee(s) to your deposit account, section "4b" of Part B - Fee(s) Transmittal should be completed and an extra copy of the form should be submitted. If an equivalent of Part B is filed, a request to reapply a previously paid issue fee must be clearly made, and delays in processing may occur due to the difficulty in recognizing the paper as an equivalent of Part B.

III. All communications regarding this application must give the application number. Please direct all communications prior to issuance to Mail Stop ISSUE FEE unless advised to the contrary.

IMPORTANT REMINDER: Utility patents issuing on applications filed on or after Dec. 12, 1980 may require payment of maintenance fees. It is patentee's responsibility to ensure timely payment of maintenance fees when due.

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

Fee(3) Transmittal. This certificate cannot be used for any other account of the control of the	A certificate of mailing can only be used for domestic mailings of the	A contificate of mailing			tions.	indicated unless correcte maintenance fee notificat
CONNOLLY BOVE LODGE & HUTZ LLP SUITE 800 1990 M STREET NW WASHINGTON, DC 20036-3425 APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATIO. 10/528,797 03/23/2005 Chrystelle Langlais 21029-00288-US1 9162 TITLE OF INVENTION: MEMBRANE BIOREACTOR WASTE WATER TREATMENT METHOD APPLN-TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DU nonprovisional NO \$1400 \$300 \$0 \$1700 11/20/20 EXAMINER ART UNIT CLASS-SUBCLASS BARRY, CRESTER T 1724 210-609000 1. Change of correspondence address or indication of "Fee Address" (17) Change of correspondence address or indication of "Fee Address" (17) Change of correspondence address or indication form sumber is required.	Each additional paper, such as an assignment or formal drawing musi	Transmittal. This certifi Each additional paper.	Fee(for any change of address)	ENCE ADDRESS (Note: Use Block	CURRENT CORRESPONDE
CONNOLLY BOVE LODGE & HUTZ LLP SUITE 800 1990 M STREET NW WASHINGTON, DC 20036-3425 APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION 10/528,797 03/23/2005 Chrystelle Langlais 21029-00288-US1 9162 TITLE OF INVENTION: MEMBRANE BIOREACTOR WASTE WATER TREATMENT METHOD APPLN.TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DU nonprovisional NO \$1400 \$300 \$0 \$1700 11/20/20 EXAMINER ART UNIT CLASS-SUBCLASS BARRY, CHESTER T 1724 210-609000 1. Change of correspondence address (or Change of Correspondence Address form PTO/SB/1/2) attached. 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents, if no name is 18 printed with the printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity C9 publication Fee (No small entity discount permitted) 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity C9 publication Fee (No small entity discount permitted) 1 change of correspondence address or indication of The Address' indication form Tee Address' indication for	•		nave	6	7590 08/18/200	30678
APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION 10/528,797 03/23/2005 Chrystelle Langlais 21029-00288-US1 9162 TITLE OF INVENTION: MEMBRANE BIOREACTOR WASTE WATER TREATMENT METHOD APPLN.TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DITE Nonprovisional NO \$1400 \$300 \$0 \$1700 11/20/20 EXAMINER ART UNIT CLASS-SUBCLASS BARRY, CHESTER T 1724 210-609000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address or indication of of Correspondence Address form PTO/SB/1/22) attached. The proposition of the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 3 registered patent attorneys or agent) and the names of up to 5 registered patent attorneys or agent) and the names of up to 5 registered patent attorneys or agent) and the names of up to 5 registered patent attorneys or agent) and the names of up to 5 registered patent attorneys or agent) and the names of up to 5 registered patent attorneys or agent) and the names of up to 5 registered patent attorneys or agent) and the names of up to 5 registered patent attorneys or agent) and the names of up to 5 registered patent attorneys or agent) and the names of up to 5 registered patent attorneys or agent) and the names of up to 5 registered patent attorneys or agent) and the names of up to 5 registered patent attorneys or agent) and the names of up to 5 registered patent attorneys or agent) and the names of up to 5 registered patent attorneys or agent) and the names of up to 5 registered patent attorneys or agent) and the names of up to 5 registered patent attorneys or agent) and the names of up to 5 registered	by certify that this Fee(s) Transmittal is being deposited with the United Postal Service with sufficient postage for first class mail in an envelope sed to the Mail Stop ISSUE FEE address above, or being facsimile itted to the USPTO (571) 273-2885, on the date indicated below.	by certify that this Fee(s) Postal Service with suff	I her State addr trans	UTZ LLP	ΓNW	SUITE 800 1990 M STREET
APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION 10/528,797 03/23/2005 Chrystelle Langlais 21029-00288-US1 9162 TITLE OF INVENTION: MEMBRANE BIOREACTOR WASTE WATER TREATMENT METHOD APPLN. TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE Nonprovisional NO \$1400 \$300 \$0 \$1700 11/20/20 EXAMINER ART UNIT CLASS-SUBCLASS BARRY, CHESTER T 1724 210-609000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563). Change of correspondence address or indication of of Correspondence Address form PTO/SB/P/122) attached. Use of a Customer Number is required. 1. Change of correspondence address or indication form provision of "Fee Address" indication form provision of or the Address of the patent of the patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agent) and the names of up to 3 registered patent attorneys or agent) and the names of up to 3 registered patent attorneys or agent) and the names of up to 3 registered patent attorneys or agent) and the names of up to 3 registered patent attorneys or agent) and the names of up to 3 registered patent attorneys or agent) and the names of up to 3 registered patent attorneys or agent) and the names of up to 3 registered patent attorneys or agent) and the names of up to 3 registered patent attorneys or agent) and the names of up to 3 registered patent attorneys or agent) and the names of up to 3 registered patent attorneys or agent) and the names of up to 3 registered patent attorneys or agent) and the names of up to 3 registered patent attorneys or agent) and the names of up to 3 registered patent attorneys or agent) and the names of up to 3 registered patent attorneys or agent) and the names of up to 3 registered patent attorneys or agent attorneys or agent) and the name of up to 3 registered patent attorneys or agent) and the name of	(Depositor's name)				, DC 20036-3425	WASHINGTON
10/528,797 03/23/2005 Chrystelle Langlais 21029-00288-US1 9162	(Signature)		<u></u>			
10/528,797 03/23/2005 Chrystelle Langlais 21029-00288-US1 9162	(Date)					
APPLN.TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DU nonprovisional NO \$1400 \$300 \$0 \$1700 11/20/20 EXAMINER ART UNIT CLASS-SUBCLASS BARRY, CHESTER T 1724 210-609000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. The Fee Address" indication (or "Fee Address" Indication form PTO/SB/122) attached. SASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Gov 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) STATE TOTAL FEE(S) DUE DATE DATE DATE DATE TOTAL FEE(S) DUE DATE DATE DATE DATE DATE DATE DATE DAT	ATTORNEY DOCKET NO. CONFIRMATION NO.	ATTOR	FIRST NAMED INVENTOR	4	FILING DATE	APPLICATION NO.
APPLN.TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DU nonprovisional NO \$1400 \$300 \$0 \$1700 \$11/20/20 EXAMINER ART UNIT CLASS-SUBCLASS BARRY, CHESTER T 1724 210-609000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/1/22) attached. 'Fee Address' indication (or "Fee Address" Indication form PTO/SB/1/28, Rev 0.3-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Gov	21029-00288-US1 9162	210	Chrystelle Langlais		03/23/2005	10/528,797
nonprovisional NO \$1400 \$300 \$0 \$1700 11/20/20 EXAMINER ART UNIT CLASS-SUBCLASS BARRY, CHESTER T 1724 210-609000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. The Address indication (or "Fee Address" Indication form PTO/SB/122) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Publication Fee (No small entity discount permitted)			R TREATMENT METHOI	OR WASTE WATE	: MEMBRANE BIOREAC	TITLE OF INVENTION
nonprovisional NO \$1400 \$300 \$0 \$1700 11/20/20 EXAMINER ART UNIT CLASS-SUBCLASS BARRY, CHESTER T 1724 210-609000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. The Address indication (or "Fee Address" Indication form PTO/SB/122) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Publication Fee (No small entity discount permitted)						
BARRY, CHESTER T 1724 210-609000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. The Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Please check the appropriate assignee category or categories (will not be printed on the patent): Same of a city to 3 registered patent attorneys or agents. If no name is listed, no name will be printed. Same of a single firm (having as a member a registered patent attorneys or agents) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Same of a single firm (having as a member a registered patent attorneys or agents. If no name is listed, no name will be printed. B) RESIDENCE: (CITY and STATE OR COUNTRY)	REV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE	PREV. PAID ISSUE FEE	PUBLICATION FEE DUE	ISSUE FEE DUE	SMALL ENTITY	APPLN. TYPE
BARRY, CHESTER T 1724 210-609000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. The Address form PTO/SB/122) attached. The Address indication (or "Fee Address" Indication form PTO/SB/122) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Please check the appropriate assignee category or categories (will not be printed on the patent): The Address indication of "Fee Address" Indication form a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 2 is issed, no name will be printed. B) RESIDENCE: (CITY and STATE OR COUNTRY) Please check the appropriate assignee category or categories (will not be printed on the patent): The Address indication of "Fee Address" Indication form a registered patent attorneys or agents and member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3 is identified below, the document has been recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) The Acheck is enclosed. Payment by credit card. Form PTO-2038 is attached.	\$0 \$1700 11/20/2006	\$0	\$300	\$1400	NO	nonprovisional
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Gova. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached.			CLASS-SUBCLASS	ART UNIT	INER	EXAM
CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. The Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Please check the appropriate assignee category or categories (will not be printed on the patent): 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) I ssue Fee Publication Fee (No small entity discount permitted)			210-609000	1724	HESTER T	BARRY, CI
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. The Address form PTO/SB/122 attached. The Address form PTO/SB/123 attached. The Address form PTO/SB/122 attached. The Address indication form provided attached attached attached. The Address form PTO/SB/122 attached. The Address indication form provided attached attached attached attached. The Address form PTO/SB/122 attached. The Address form PTO/SB/122 attached attached attached attached attached attached attached attached. The Address form PTO/SB/122 attached attach				"Fee Address" (37	ence address or indication of	1. Change of corresponde
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Gov 4a. The following fee(s) are submitted: See	registered patent attorneys 1	registered patent attorne	(1) the names of up to or agents OR, alternativ	of Correspondence	ondence address (or Change	_ ` `
2 registered patent attorneys or agents. If no name is listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Gov 4a. The following fee(s) are submitted: Issue Fee	rm (having as a member a 2	firm (having as a member ont) and the names of up	(2) the name of a single			$\overline{}$
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Gov 4a. The following fee(s) are submitted: Same of the patent of the pate	ys or agents. If no name is 3	eys or agents. If no name	2 registered patent attor			PTO/SB/47; Rev 03-0
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Gov 4a. The following fee(s) are submitted: Issue Fee Publication Fee (No small entity discount permitted) 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached.			THE PATENT (print or type	D BE PRINTED ON	ND RESIDENCE DATA TO	3. ASSIGNEE NAME AT
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Gov 4a. The following fee(s) are submitted: Issue Fee Publication Fee (No small entity discount permitted) 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached.	nt. If an assignee is identified below, the document has been filed for	ent. If an assignee is ide	data will appear on the pa	below, no assignee	ess an assignee is identified	PLEASE NOTE: Unle
4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) Issue Fee Publication Fee (No small entity discount permitted) 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached.		- -	_	on or uns torm is ivo		
4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) Issue Fee Publication Fee (No small entity discount permitted) 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached.	,		` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `			, ,
4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) Issue Fee Publication Fee (No small entity discount permitted) 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached.	ти . По — т — т — п — По — т —		·			Diagram akasahada ang sa
☐ Issue Fee ☐ A check is enclosed. ☐ Publication Fee (No small entity discount permitted) ☐ Payment by credit card. Form PTO-2038 is attached.	dividual Corporation or other private group entity Covernment	dividual Corporatio	inted on the patent):	egories (will not be pr	ate assignee category or cat	Please check the appropri
☐ Publication Fee (No small entity discount permitted) ☐ Payment by credit card. Form PTO-2038 is attached.	first reapply any previously paid issue fee shown above)	first reapply any previous		41	are submitted:	
	Form PTO-2038 is attached.	Form PTO-2038 is attac		itted)	o small entity discount pern	
☐ Advance Order - # of Copies ☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit	thorized to charge the required fee(s) any deficiency, or credit any	thorized to charge the re	The Director is hereby			
5. Change in Entity Status (from status indicated above)				ove)	tus (from status indicated ab	5. Change in Entity Stat
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).						
NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other interest as shown by the records of the United States Patent and Trademark Office.	applicant; a registered attorney or agent; or the assignee or other party in	applicant; a registered at	office.	d) will not be accepted atent and Trademark	d Publication Fee (if require ecords of the United States	NOTE: The Issue Fee and interest as shown by the r
Authorized Signature Date	Date	Date				Authorized Signature
	Registration No.				·	Typed or printed name
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, prepar submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Comme Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. B	n a benefit by the public which is to file (and by the USPTO to process) ated to take 12 minutes to complete, including gathering, preparing, and al case. Any comments on the amount of time you require to complete J.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. HIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450.	nin a benefit by the public ated to take 12 minutes t	on is required to obtain or re	1.311. The information of the control of the contro	ation is required by 37 CFR iality is governed by 35 U.S application form to the US	This collection of informa an application. Confident submitting the completed

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



United States Patent and Trademark Office

UNITED STATES DEPARTMENT OF COMMERCE United States Patent and Trademark Office Address: COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, Virginia 22313-1450 www.uspio.gov

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/528,797	03/23/2005	Chrystelle Langlais	21029-00288-US1	9162	
30678 7.	590 08/18/2006	EXAM	EXAMINER		
CONNOLLY BO	OVE LODGE & HUT	BARRY, CI	BARRY, CHESTER T		
SUITE 800	***			PAPER NUMBER	
1990 M STREET WASHINGTON,	=	1724 DATE MAILED: 08/18/2000	6		

Determination of Patent Term Adjustment under 35 U.S.C. 154 (b)

(application filed on or after May 29, 2000)

The Patent Term Adjustment to date is 0 day(s). If the issue fee is paid on the date that is three months after the mailing date of this notice and the patent issues on the Tuesday before the date that is 28 weeks (six and a half months) after the mailing date of this notice, the Patent Term Adjustment will be 0 day(s).

If a Continued Prosecution Application (CPA) was filed in the above-identified application, the filing date that determines Patent Term Adjustment is the filing date of the most recent CPA.

Applicant will be able to obtain more detailed information by accessing the Patent Application Information Retrieval (PAIR) WEB site (http://pair.uspto.gov).

Any questions regarding the Patent Term Extension or Adjustment determination should be directed to the Office of Patent Legal Administration at (571)-272-7702. Questions relating to issue and publication fee payments should be directed to the Customer Service Center of the Office of Patent Publication at 1-(888)-786-0101 or (571)-272-4200.